2155

PTO/SB/81 (11-04)

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS INDICATION FORM**

JUL 2 9 2005

Application Number	09/872.177
Filing Date	6/1/2001
First Named Inventor	Suresh Katukam
Title	
Art Unit	2155
Examiner Name	Duong, Oanh L
Attorney Docket Number	CISCP691

I hereby revoke all	previous powers of attorney giver	n in the abov	e-identified appl	lication.			
I hereby appoint:	Г						0
Practitioners a Number:	associated with the Customer		54406				
OR	<u>L.</u>	·			J		
Practitioner(s)	named below:						
	Name	lame Registration Number					
							
							
	or agent(s) to prosecute the application	identified abov	e, and to transact	all business i	n the Un	ited States Patent	and
Trademark Office conn	ected therewith.			 			
I —	hange the correspondence address for	r the above-ide	entified application	ı to:			
The address a	associated with the above-mentioned	Customer Nur	nber:				
OR							
The address a	associated with Customer Number:						
OR							
Firm or Individua	ıl Name						
Address							
City		State			Zip		
Country		<u>.</u>	T		<u>-</u>		
Telephone		Fax				<u> </u>	
I am the: Applicant/Inven	tor.						
	ord of the entire interest. See 37 CFR er 37 CFR 3.73(b) is enclosed. (Form I						
Olatomora Grado	SIGNATURE of A		ssignee of Recor	rd			
Signature	S I	-		Date	July	1244, 2005	
	I Del	A The		D C · C	"		
Name	Robert Barr (The Sel	Town T	Telephone	(408	8) 526-4000	
Title and Company	Vice President, Intellectual Prop	perty					
NOTE: Signatures of all the signature is required, see be	inventors or assignees of record of the entire elow*.	interest or their	representative(s) are	required. Subr	mit multiple	e forms if more than o	one
*Total of	forms are submitted.						